2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005442

Entity Name: TRADITIONAL HOME MORTGAGE, INC.

FILED Jan 24, 2007 Secretary of State

8075 E MORGAN TRAIL 15990 N GREENWAY-HAYDEN LOOP

SUITE 4 SUITE 400

SCOTTSDALE, AZ 85258 SCOTTSDALE, AZ 85260

Current Mailing Address: New Mailing Address:

8075 E MORGAN TRAIL 15990 N GREENWAY-HAYDEN LOOP

SUITE 4 SUITE 400 SCOTTSDALE, AZ 85258 SCOTTSD.

SCOTTSDALE, AZ 85260

FEI Number: 86-1034786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Name:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM () Delete Title: CHRM (X) Change () Addition

Name: POLLARD, JEFFREY Name: POLLARD, JEFFREY

Address: 8075 E MORGAN TRAIL SUITE 4 Address: 15990 N GREENWAY-HAYDEN LOOP, SUITE 400

City-St-Zip: SCOTTSDALE, AZ 85258 City-St-Zip: SCOTTSDALE, AZ 85260

Name: POLLARD, JEFFREY Name: POLLARD, JEFFREY

Address: 8075 E MORGAN TRAIL SUITE 4 Address: 15990 N GREENWAY-HAYDEN LOOP, SUITE 400

City-St-Zip: SCOTTSDALE, AZ 85258 City-St-Zip: SCOTTSDALE, AZ 85260

Title: VCHR () Delete Title: VCHR (X) Change () Addition

Name: RAHN, MICHAEL Name: RAHN, MICHAEL

Address: 8075 E MORGAN TRAIL SUITE 4 Address: 15990 N GREENWAY-HAYDEN LOOP, SUITE 400

City-St-Zip: SCOTTSDALE, AZ 85258 City-St-Zip: SCOTTSDALE, AZ 85260

Title: V () Delete Title: V (X) Change () Addition

RAHN, MICHAEL Name: RAHN, MICHAEL

Address: 8075 E MORGAN TRAIL SUITE 4 Address: 15990 N GREENWAY-HAYDEN LOOP, SUITE 400

City-St-Zip: SCOTTSDALE, AZ 85258 City-St-Zip: SCOTTSDALE, AZ 85260

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL RAHN VP 01/24/2007